



DIMENSIONS

M I R V A C R E S I D E N T I A L L O Y A L T Y

Family Share Offer

FAMILY MEMBER REFERRAL FORM FOR DIMENSION LOYALTY MEMBERS (SILVER AND ABOVE)

To introduce a Referred Family Member to benefit from Dimensions Mirvac Residential Loyalty, please complete this form and return it to your Mirvac Sales Consultant.

Note: This form must be:

- (a) Completed by both:
 - (i) the Referred Family Member; and
 - (ii) the Family Referrer who is a current Dimension Loyalty Member with Silver, or above, membership status who must both meet the definition of Family; and

- (b) Submitted to and accepted by Mirvac (as documented on this form) prior to the proposed Referred Family Member entering into an Eligible Contract for a Direct Sale.

Family means, in relation to a Family Referrer or Referred Family Purchaser as the case may be:

- (a) a spouse or de facto partner;
- (b) a parent (including the biological, adoptive, foster, custodial or non-custodial parent);
- (c) a sibling (including the biological, adopted, foster or step sibling);
- (d) a child (including the biological, adopted, foster or step child);
- (e) a spouse or de facto partner of any of the people in (b) – (d) inclusive above;
- (f) a company in respect of which any person in paragraphs (a) to (g) above is a shareholder or director or
- (g) a trust or superfund in respect of which any person in paragraphs (a) to (g) above is a trustee or beneficiary.

Terms and conditions apply. Visit Dimensions.mirvac.com

Referred by (direct family member with silver or above membership status)

Referred by (Name):

Email:

Phone:

Address:

Previous Mirvac property purchases:

Acknowledgement:

By signing this form, I confirm that I am a Dimension Loyalty Member with Silver or above membership status and acknowledge that the Referred Family Member meets the definition of Family as it relates to me and I wish to refer them in accordance with the Mirvac Dimensions Loyalty Terms and Conditions

Signature of existing Dimension Loyalty Member with Silver or above membership status:

Mirvac Sales Consultant name and signature:



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M I R V A C R E S I D E N T I A L L O Y A L T Y

Referred Family Member:

Title:

First Name:

Last Name:

Email:

Phone:

Address:

Interested Project(s):

Acknowledgement:

By signing this form, I acknowledge that I have been referred by a Family Member and I agree to become a Member and be bound by the Mirvac Dimensions Loyalty Terms and Conditions.

Signature of Purchaser(s):

Acknowledgement:

Approved

Declined

Reason for decline:



Date and time received:

Mirvac State Sales Manager name, signature and date: